Fill in this informa	ation to identify your case:	
Debtor 1	Christopher Shawn Friend	_
Debtor 2 (Spouse, if filing)		_
United States Bar	nkruptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA	_
Case number	21-12884-MDC	Check if this is:
(If known)		An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Fo	orm 106I	MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	11: Describe Employment							
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse				
	If you have more than one job,	Franksim aut atatus	■ Employed	☐ Employed				
	attach a separate page with information about additional	Employment status	☐ Not employed	■ Not employed				
	employers.	Occupation	parts coordinator					
	Include part-time, seasonal, or self-employed work.	Employer's name	Caliber Holdings Corporation					
	Occupation may include student or homemaker, if it applies.	Employer's address	2941 Lake Vista Drive Lewisville, TX 75067					
		How long employed the	here? 5 years					

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 3,120.00 0.00 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 3. 693.33 0.00 Calculate gross Income. Add line 2 + line 3. 3,813.33 0.00

Official Form 106l Schedule I: Your Income page 1

Debt	tor 1	Christopher Shawn Friend	_		Case	number (if k	(nown)	21	-12884-M	DC	
					For	Debtor 1		E	or Debtor	2 or	
					1 01	Debtor 1			on-filing s		
	Cop	y line 4 here	4.		\$	3,81	3.33	\$	· 5 ·	0.00	
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5	a.	\$	47	2.33	\$		0.00	
	5b.	Mandatory contributions for retirement plans	51	b.	\$	14	3.00	\$		0.00	
	5c.	Voluntary contributions for retirement plans	50	c.	\$_		0.00	\$		0.00	
	5d.	Required repayments of retirement fund loans	50	d.	\$		0.00	\$		0.00	
	5e.	Insurance	56	е.	\$	69	7.67	\$		0.00	
	5f.	Domestic support obligations	51	f.	\$		0.00	\$		0.00	
	5g.	Union dues	5	g.	\$		0.00	\$		0.00	
	5h.	Other deductions. Specify:	_ 5I	h.+	\$		0.00	+ \$		0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,31	3.00	\$		0.00	
7.	Calc	sulate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,50	0.33	\$		0.00	
8.	List	all other income regularly received:									
	8a.	Net income from rental property and from operating a business,									
		profession, or farm Attach a statement for each property and business showing gross									
		receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	88	a.	\$		0.00	\$		0.00	
	8b.	Interest and dividends	81	b.	\$		0.00	\$		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent			-						
		regularly receive									
		Include alimony, spousal support, child support, maintenance, divorce	0.		Φ			Φ		0.00	
	8d.	settlement, and property settlement. Unemployment compensation	80 80		\$_ \$		0.00	\$ \$		0.00	
	ou. 8e.	Social Security	86		\$ _		0.00	э \$		0.00	
	8f.	Other government assistance that you regularly receive	O	ፘ.	Ψ_		0.00	φ		0.00	
	OI.	Include cash assistance and the value (if known) of any non-cash assistance	<u>.</u>								
		that you receive, such as food stamps (benefits under the Supplemental									
		Nutrition Assistance Program) or housing subsidies.									
		Specify:	81		\$		0.00	\$		0.00	
	8g.	Pension or retirement income	8	g.	\$_		0.00	\$		0.00	
		Anticipated 2021 Tax Refund			•	20	0 00	•		0.00	
	8h.	Other monthly income. Specify: (pro-rated)	81	h.+			0.00	. · .		0.00	
		Contribution from girlfriend	_		\$_	1,40	0.00	\$	\$		
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	1 69	0.00	\$		0.00	
٠.			0.			1,00	0.00	_		0.00	1
10	Calc	culate monthly income. Add line 7 + line 9.	10.	\$		4,190.33	. @		0.00	= \$	4,190.33
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ-		4,190.33	- T Ψ -		0.00	- φ —	4,190.33
		· .									
11.		e all other regular contributions to the expenses that you list in Schedule			donto		n m ata		ام		
		de contributions from an unmarried partner, members of your household, your rfriends or relatives.	uep	enc	Jenis,	your room	IIIIale	s, an	u		
		not include any amounts already included in lines 2-10 or amounts that are not	avail	labl	le to p	ay expens	ses list	ed ir	n Schedule	J.	
	Spec	sify:				, ,			11.	+\$	0.00
									Г		
12.		the amount in the last column of line 10 to the amount in line 11. The res									
		e that amount on the Summary of Schedules and Statistical Summary of Certai	ın Lia	abil	ities a	and Relate	d Data	a, it it	12.	\$	4,190.33
	appli	65									,
										Combin	
12	Do .	ou expect an increase or decrease within the year after you file this form	2							monthly	income
13.	DO y	•	ſ								
		No.									
		Yes. Explain:									